

Evaluating Rescue Teams or Services

Use with the Confined Spaces book, Chapter 296-809 WAC

This helpful tool will help you do the following for permit-required confined spaces in your workplace:

- Evaluate the type of rescue services you need
- and**
- Determine how well rescue services perform

Select and use either on-site rescue teams or off-site rescue services that will minimize the potential for harm to both entrants and rescuers.

For any rescue team or service, your evaluation should consist of the following 2 elements:

- An **initial evaluation** where you decide whether a rescue team or service is adequately trained and equipped to perform the kind of rescues needed at your workplace in a timely manner.
- A **performance evaluation** on the performance of the prospective or existing rescue team or service during an actual or practice rescue.

For example:

During your initial evaluation you determined that an on-site rescue team would be more expensive but not more effective than an off-site rescue service. As a result, you hire an off-site rescue service.

After observing the off-site rescue service perform a practice rescue, you decide their training or preparedness isn't adequate. You decide to select another rescue service or to form an on-site rescue team.

Initial Evaluation

The following information can help you determine the rescue service needs for your workplace.

For an off-site rescue service you need to, at a minimum, contact the service to plan and coordinate the evaluations required.

The following are examples that **do not** meet the requirements of WAC 296-809-50014, *Make sure you have adequate rescue and emergency services available*:

- Posting a rescue service's number without contacting them
- Planning to rely on 911 emergency services without checking to see if they are able to provide them.



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Note:

Whether a rescue service meets your workplace needs depends on all of the following:

- The confined spaces from which a rescue may be necessary
- The hazards likely to be encountered in those spaces.
- The number of entrants needing rescue.

Table HT-1 can help you determine whether a rescue service meets your permit-required confined space rescue needs. Use the column labeled "Results" to answer the questions in the "Task" column.

Table HT-1

Initial Evaluation Worksheet

(If you answer no to any of these questions, you need to consider an alternative.)

Task	Results
<p>1. Determine the rescue response time needs for your permit-required confined spaces.</p> <p>Examples:</p> <p>If entering an atmosphere that is potentially or immediately dangerous to life or health (IDLH), the rescue team or service needs to be standing by at the permit-required confined space, ready to enter.</p> <p>If the danger to entrants is restricted to mechanical hazards that can cause injuries such as broken bones or abrasions, a longer response time of 10 or 15 minutes might be acceptable.</p>	<p>_____minutes</p>



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Task	Results
<p>2. Consider the amount of time required for the rescue service to:</p> <ul style="list-style-type: none"> • Receive notification • Arrive at the scene <p>To find out how quickly the rescue team or service is able to get from its location to your permit-required confined spaces, you need to consider:</p> <ul style="list-style-type: none"> - The location of the rescue team or service relative to your workplace - The quality of roads and highways, bottlenecks, or traffic congestion that might be encountered in transit - The reliability of the rescuer's drivers. - The training and skills of the rescuer's drivers. • Set up and be ready for entry. 	<ul style="list-style-type: none"> • Receive notification + _____ minutes • Arrive at the scene + _____ minutes <p>Comments:</p> <ul style="list-style-type: none"> • Set up and be ready for entry. + _____ minutes = _____ minutes <p>Does this amount of time meet your needs from Task 1?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>3. Determine the availability of the rescue service by considering:</p> <p>a. Is the rescue service available at the times of the day when you will be entering permit-required confined spaces?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>



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Resources



Task	Results
b. Are key members of the rescue service available at these times?	Yes <input type="checkbox"/> No <input type="checkbox"/>
c. If the rescue service becomes unavailable while an entry is underway, can they notify you so you can instruct the attendant to abort the entry immediately?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Determine if the rescue service meets all of the requirements in the Performance Evaluation Worksheet found in Table HT-2.	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If you answered "yes" above, how soon can the plan be implemented?</p> <p>_____</p> <p>If you answered "no" and this can't be resolved, then you need to consider an alternative.</p>
5. Determine if a 911 service is willing to perform rescues at your workplace:	
a. If you call 911, is a responder available?	Yes <input type="checkbox"/> No <input type="checkbox"/>
b. Will the 911 responder be willing to perform rescue?	<p>Rescue <input type="checkbox"/></p> <p>First Aid Only <input type="checkbox"/></p> <p>If you answered "first aid only," then an alternative is required.</p>
c. Have you made sure the 911 responders can perform rescues in your spaces?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Determine if there is an adequate communication method between the attendant and the prospective rescuer:	
Can a request for rescue be transmitted without delay?	Yes <input type="checkbox"/> No <input type="checkbox"/>

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Performance Evaluation

WAC 296-809-50014, Make sure you have adequate rescue and emergency services, requires rescue practice at least once every 12 months if the team or service hasn't successfully performed a rescue within that time. This practice exercise provides you with an opportunity to evaluate the rescue service under conditions similar to your permit-required confined spaces.

First, as part of any practice session, the rescue service or another qualified party should perform a critique of the practice rescue, so that deficiencies can be corrected in:

- Procedures
- Equipment
- Training
- Number of people

Then, you should review the results of the critique and any corrections made for deficiencies identified by a "no" answer in Table HT-2. This will help you determine whether the service could be quickly upgraded to meet your needs.

Table HT-2 will help you determine:

- If the rescue service meets all of the performance requirements in WAC 296-809-50014, Make sure you have adequate rescue and emergency services
and
- What changes may be necessary.

Use the right column labeled "Results" to answer the questions in the "Task" column.



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Table HT-2

Performance Evaluation Worksheet

(If you answer **no** to questions 1-12, you need to take corrective action)

Task	Result
1. Have all team members been trained as entrants, including the potential hazards of all permit-required confined spaces, or of representative spaces, from which rescue may be needed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Can team members recognize the signs, symptoms, and consequences of exposure to any hazardous atmospheres that may be present in those permit-required confined spaces?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Is every team member:	
a. Provided with and properly trained in the use of any PPE that may be needed to perform rescues in the facility, such as air-line respirators or fall arrest equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/>
b. Properly trained to perform functions during rescues, and to use any rescue equipment, such as ropes and backboards, needed in a rescue attempt?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Are team members trained in the first-aid and medical skills needed to treat victims injured or overcome by the types of hazards that maybe encountered in the permit spaces at the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Do all team members perform their duties safely and efficiently?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Do the team members focus on their own safety before considering the safety of the victim?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. If necessary, can the rescue service properly test the atmosphere to identify acceptable entry conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8. Can the rescue team members identify the information that applies to the rescue from:	
a. Entry permits	Yes <input type="checkbox"/> No <input type="checkbox"/>
b. Hot work permits	Yes <input type="checkbox"/> No <input type="checkbox"/>
c. Material Safety Datat Sheets (MSDSs)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
9. Has the rescue service been informed of any hazards that may arise from outside the permit-required confined space, such as those caused by future work near the space?	Yes <input type="checkbox"/> No <input type="checkbox"/>



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Task	Result
10. If necessary, can the rescue service properly rescue injured employees from a permit space that has any of the following: <ul style="list-style-type: none"> a. A limited size opening (less than 24 inches (60.9 cm) in diameter)? 	Yes <input type="checkbox"/> No <input type="checkbox"/>
<ul style="list-style-type: none"> b. Limited internal space? 	Yes <input type="checkbox"/> No <input type="checkbox"/>
<ul style="list-style-type: none"> c. Internal obstacles or hazards? 	Yes <input type="checkbox"/> No <input type="checkbox"/>
11. If necessary, can the rescue service safely perform an elevated (high angle) rescue?	Yes <input type="checkbox"/> No <input type="checkbox"/>
12. Determine if the rescue service has a plan for each type of rescue operation at your workplace. <ul style="list-style-type: none"> a. Does the rescue service have a plan for each of the kinds of permit space rescue operations at your workplace? 	Yes <input type="checkbox"/> No <input type="checkbox"/>
<ul style="list-style-type: none"> b. Is the plan adequate for all types of rescue operations that may be needed at your workplace? 	Yes <input type="checkbox"/> No <input type="checkbox"/>
13. Rescue practice may occur in representative confined spaces or in the most restrictive spaces. When planning a practice include any of the following features that exist in your permit-required confined spaces: Space Access	Is this type of rescue a possible situation at your workplace? Yes <input type="checkbox"/> No <input type="checkbox"/>
Horizontal -- The entrance is located on the side of the permit space. Use of retrieval lines could be difficult.	<input type="checkbox"/> A description is attached.
Vertical -- The entrance is located: <ul style="list-style-type: none"> - On the top of the permit-required confined space so that rescuers must climb down or - The bottom of the permit space so that rescuers must climb up, to enter the space. Rescuers may need special knowledge to safely retrieve an injured entrant.	Is this type of rescue a possible situation at your workplace? Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> A description is attached.



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<p>Entrance Size</p> <p>Restricted -- An entrance with a smallest dimension of 24 inches or less. Entrances of this size are too small for a rescuer to enter the space while using a self-contained breathing apparatus, or allow normal spinal immobilization of an injured employee.</p>	<p>Is this type of rescue a possible situation at your workplace?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><input type="checkbox"/> A description is attached.</p>
<p>Unrestricted -- An entrance with a smallest dimension greater than 24 inches. These entrances allow relatively free movement into and out of the permit space.</p>	<p>Is this type of rescue a possible situation at your workplace?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><input type="checkbox"/> A description is attached.</p>
<p>Internal configuration</p> <p>Open -- No obstacles, barriers, or obstructions within the space. For example, a water tank.</p>	<p>Is this type of rescue a possible situation at your workplace?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><input type="checkbox"/> A description is attached.</p>
<p>Obstructed -- The space contains some type of obstacle, requiring a rescuer to maneuver around it. For example, a baffle or mixing blade. Large equipment such as a ladder or scaffold brought into a space for work purposes is considered an obstacle if the positioning or size makes rescue more difficult.</p>	<p>Is this type of rescue a possible situation at your workplace?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><input type="checkbox"/> A description is attached.</p>
<p>Elevated -- A space where the entrance is above grade by 4 feet or more. This type of space usually requires knowledge of high angle rescue procedures because it is difficult to package and transport an injured employee to the ground from the entrance.</p>	<p>Is this type of rescue a possible situation at your workplace?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><input type="checkbox"/> A description is attached.</p>
<p>Non-elevated -- A space with the entrance located less than 4 feet above grade. The rescue team can transport an injured employee normally.</p>	<p>Is this type of rescue a possible situation at your workplace?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><input type="checkbox"/> A description is attached.</p>